

Page 1

1 UNITED STATES DISTRICT COURT
2 SOUTHERN DISTRICT OF NEW YORK

3 -----X
4 ADRIAN SCHOOLCRAFT,
5 Plaintiff,

6 Case No:
7 - against - 10 CV 06005

8 THE CITY OF NEW YORK, ET AL.,
9 Defendants.

10 -----X
11 100 Church Street
12 New York, New York

13 January 30, 2014
14 10:22 a.m.

15
16
17 DEPOSITION OF CATHERINE LAMSTEIN-REISS, M.D.,
18 pursuant to Subpoena, taken at the above
19 place, date and time, before DENISE ZIVKU, a
20 Notary Public within and for the State of
21 New York.
22
23
24
25

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(Continued.)

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2
3 S T I P U L A T I O N S :
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7

8 IT IS HEREBY STIPULATED AND AGREED by and
9 between the attorneys for the respective
10 parties hereto, that this examination may
11 be sworn to before any Notary Public.
12

13 IT IS FURTHER STIPULATED AND AGREED that the
14 filing and certification of the said
15 examination shall be waived.
16

17 IT IS FURTHER STIPULATED AND AGREED that all
18 objections to questions, except as to the
19 form of the question, shall be reserved for
20 the time of trial.
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1
2 CATHERINE LAMSTEIN-REISS, M.D., a
3 Nonparty witness herein, having been
4 first duly sworn by a Notary Public
5 within and for the State of New York, was
6 examined and testified as follows:
7

8 EXAMINATION BY

9 MR. SMITH:

10
11 Q. Will you state your name and
12 address for the record, please.

13 A. Catherine Lamstein-Reiss, M.D.,
14 NYPD Psych Evaluation Section, 59-17
15 Junction Boulevard, Corona, New York 11368.

16 MR. SMITH: We are going on the
17 record, it's 10:22. We are at Law
18 Department at 100 Church Street about
19 to begin the deposition of Dr.
20 Lamstein.

21 THE WITNESS: Correct.

22 MR. SMITH: Before we begin with
23 the witness, Suzanna, as we have done
24 in the past with other witness who are
25 in the employ of the City of New York,

1 C. LAMSTEIN-REISS, M.D.

2 Q. Isn't that what you do?

3 A. That's one type of referral that
4 we might get.

5 Q. Is that the type of referral
6 that you got in the Schoolcraft matter?

7 MS. PUBLICKER METTHAM:

8 Objection.

9 A. No.

10 Q. What type of referral did you
11 get in the Schoolcraft matter?

12 A. That was a telephone referral
13 from -- I'm sorry, not -- may have been
14 telephone, but either way that was a
15 referral from his district surgeon. That
16 wasn't like a commanding officer, or duty
17 captain thinking there might be a
18 psychological problem removing the gun
19 pending our evaluation. This was the
20 district surgeon became aware of
21 psychological issues with the officer and
22 referred to us for an evaluation.

23 Q. How do you know that the
24 district surgeon didn't become aware of
25 psychological issues as a result of

1 C. LAMSTEIN-REISS, M.D.

2 discussion with a commanding officer in
3 Schoolcraft's case?

4 MS. PUBLICKER METTHAM:

5 Objection.

6 A. All I know is that -- all I know
7 is the information that the officer provided
8 to the district surgeon.

9 Q. What I want know is what
10 knowledge do you have about the sources of
11 information that the district surgeon had
12 available to him when he made the referral
13 to you?

14 MS. PUBLICKER METTHAM:

15 Objection.

16 A. All I know is the information
17 that the officer provided to him was
18 sufficient for the referral. I didn't ask
19 him did you speak to anybody else about
20 anything else. If there's anything else
21 that's relevant, if information comes from a
22 command, the district surgeon simply would
23 tell us that. That's the reason for the
24 referral.

25 Q. Did the district surgeon tell

1 C. LAMSTEIN-REISS, M.D.

2 you sources of his information that formed
3 the basis for his referral?

4 MS. PUBLICKER METTHAM:

5 Objection.

6 A. I don't recall. The assumption
7 is it came from the officer.

8 Q. Doctor, I'm not here to try and
9 make assumptions. Okay. You're here,
10 you're under oath and if you have a
11 recollection of something, please provide
12 it, but I don't want you guessing, I don't
13 want you making assumptions; is that
14 understood?

15 A. That's understood.

16 Q. All right. So I am going to ask
17 the question again just so it's clear. Did
18 the district surgeon, in this case Ciuffo,
19 tell you what the sources of information he
20 had which formed the basis for his referral
21 to you?

22 MS. PUBLICKER METTHAM:

23 Objection.

24 A. I don't recall with certainty.

25 Q. What do you recall about him

1 C. LAMSTEIN-REISS, M.D.

2 telling you the source of his information?

3 A. I don't recall that with
4 certainty.

5 Q. What do you mean by with
6 certainty? Do you have any recollection of
7 the conversation with Ciuffo?

8 MS. PUBLICKER METTHAM:

9 Objection.

10 A. I recall getting his --
11 actually, I would need to refer to the file
12 to see if I have a telephone referral.

13 Q. So the answer to my question is
14 sitting here today, you do not have a
15 recollection of the actual conversation that
16 you had with Ciuffo about Schoolcraft; is
17 that correct?

18 MS. PUBLICKER METTHAM:

19 Objection.

20 A. I recall deciding doing
21 administrative matters with the gun removal
22 -- not the gun removal, the administrative
23 matters with his duty status. I know he
24 provided information to us that the officer
25 had anxiety secondary to stress on the job.

1 C. LAMSTEIN-REISS, M.D.

2 I don't recall with certainty if he said
3 specifically -- if he specifically said
4 where he got that information. I don't have
5 a recollection of that.

6 Q. I'm going to try to be more
7 clear. If I'm asking you what your
8 recollection is about something, I'm not
9 asking you to draw inferences from other
10 information that you have secondary sources
11 about what that conversation was. What I am
12 asking you is sitting here today, do you
13 have a recollection of a conversation that
14 you had with Ciuffo about Schoolcraft?

15 MS. PUBLICKER METTHAM:

16 Objection. Asked and answered multiple
17 times. You may answer again.

18 A. I recall -- the only thing I
19 recall is the administrative matters. I
20 don't recall -- I don't directly recall our
21 conversation administrative referral. That
22 was a number of years ago. I recall what
23 the information was. I don't recall him
24 specifically saying where he got that
25 information. I would need to refer to the

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1 C. LAMSTEIN-REISS, M.D.

2 initial referral, which is in the records.

3 Q. Your file?

4 A. Correct.

5 Q. All right, would you mind taking
6 a look at your file and seeing if looking at
7 that file refreshes your recollection about
8 the subject that I am asking you about,
9 which is, whether or not Ciuffo told you the
10 sources of his information which formed the
11 basis for his referral from the medical
12 division to PES?

13 MS. PUBLICKER METHAM: I would
14 prefer that you mark the actual
15 production as an exhibit so that we can
16 refer to the Bates Numbers.

17 MR. SMITH: Yeah, if she could
18 just take a look at her -- I have a
19 full copy of the whole thing.

20 Q. I just want you to take a look
21 at your originals, see if that refreshes
22 your recollection, that would be helpful.

23 MS. PUBLICKER METHAM: If it's
24 -- review that, see if you could find
25 that. If it's one of the pages that I

1 C. LAMSTEIN-REISS, M.D.

2 removed, you can review those.

3 THE WITNESS: It shouldn't be.

4 MR. SMITH: While you're doing
5 that, I am going to mark as Exhibit 68,
6 the next exhibit, which has been Bates
7 Stamped NYC 2893 through 3032.

8 (Plaintiff's Exhibit 68,
9 document, was marked for identification
10 as of this date.)

11 A. I don't -- I didn't document
12 that so all I had -- I can tell you what my
13 assumptions were about it, why I had that
14 assumption, but I don't have that Dr. Ciuffo
15 specifically where he -- specifically said
16 where he got that information.

17 Q. What are you looking at?

18 A. I was looking at my -- the note
19 of my telephone call with him.

20 Q. What's the date?

21 A. April 14, 2009.

22 Q. This is a handwritten note by
23 you?

24 A. Correct.

25 Q. Dated April 14th?

1 C. LAMSTEIN-REISS, M.D.

2 A. Correct.

3 Q. Can you -- can I take a look at
4 that, please?

5 MS. PUBLICKER METTHAM: I
6 believe the page she's looking at is
7 NYC -- now the Bates Numbers are cut
8 off on the bottom of this printout you
9 provided, but it appears to be 2997, is
10 what she was referring to.

11 MR. SMITH: Thank you.

12 A. About two-thirds down, T/C with
13 Dr. Ciuffo.

14 Q. Can you read that entry into the
15 record, please.

16 A. April 14, 2009 telephone contact
17 with Dr. Ciuffo. Doctor taking MOS off
18 medical sick and restoring medically to full
19 duty.

20 Q. And then that's your signature?

21 A. That's my signature, yes.

22 Q. There's some -- can I just see
23 the original of that, please?

24 A. Then I also reviewed the written
25 referral he sent to us.

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1 C. LAMSTEIN-REISS, M.D.

2 Q. Where is that written referral?

3 A. The top of says: Consultation
4 referral medical division. Consultant's
5 report underneath. Looks like this. Should
6 be one of the oldest things in the file.

7 MR. SMITH: It's Bates Number on
8 our copy is 2914.

9 Q. Could I see the original to
10 that, please?

11 A. Sure.

12 Q. This page with the consultation
13 referral medical division form, that has a
14 reference to conversations you had with
15 Ciuffo?

16 A. No, it's a written information
17 he provided to PES.

18 Q. What is the information that he
19 provided to PES?

20 A. We were asked to do an
21 evaluation, because the officer had acute
22 anxiety secondary distress on the job,
23 please evaluate.

24 Q. All right, so what you were just
25 reading that's not your handwriting, that's

1 C. LAMSTEIN-REISS, M.D.

2 Ciuffo's handwriting?

3 A. Dr. Ciuffo, yes.

4 Q. Dr. Ciuffo. What does that mean
5 acute anxiety second degree stress on the
6 job?

7 A. Acute anxiety is -- means it's
8 not a chronic -- yeah, it's not a chronic
9 long term lifelong anxiety. That he is
10 going through a period of increased anxiety
11 due to stress on the job.

12 Q. Was this a diagnosis by Ciuffo
13 of the Schoolcraft's mental condition?

14 MS. PUBLICKER METTHAM:

15 Objection.

16 A. That was Dr. Ciuffo's assessment
17 as it appears in his writings.

18 MR. SMITH: 2914. You can't
19 read it in the copy.

20 MS. PUBLICKER METTHAM: I
21 believe it's easier to read in the
22 first copy that was produced in 2010 or
23 2011.

24 MR. SMITH: Right.

25 Q. Now that you've looked at those

1 C. LAMSTEIN-REISS, M.D.

2 two entries in your file, does that refresh
3 your recollection at all on the issue of you
4 being told the sources of -- how do you
5 pronounce his name?

6 A. Ciuffo.

7 Q. Ciuffo's information about
8 Schoolcraft?

9 A. Again, I do not recall his
10 specifically stating where he got that
11 information. He may or may not have. I
12 didn't document it. I just had my
13 assumptions.

14 Q. Right. And the exercise of
15 trying to refresh a witness' recollection is
16 once they said I'm not sure, I don't really
17 remember, if you show them something
18 sometimes they go ah, now I remember and so
19 I'm asking you, after looking at these
20 entries, do you have any recollection that
21 has been recently refreshed by looking at
22 those entries?

23 A. I do not.

24 Q. How many times did you speak
25 with Dr. Ciuffo about Schoolcraft?

1 C. LAMSTEIN-REISS, M.D.

2 A. Once.

3 Q. And that was on the 14th of
4 April, right, according to your notes?

5 A. If that's the date on that note
6 that I just referred to then, yes.

7 Q. It is.

8 A. Okay, then, yes.

9 Q. Do you have any recollection of
10 the substance of that conversation, other
11 than what you've already told me?

12 A. I don't recall.

13 Q. After you stopped seeing
14 Schoolcraft, did you ever have any
15 conversation with Ciuffo about Schoolcraft?

16 A. No.

17 Q. Am I correct that the only time
18 you can recall having any conversation with
19 Ciuffo about Schoolcraft was that one
20 occasion?

21 A. Correct.

22 Q. Why don't you take a look at
23 Exhibit 68, which is a photocopy of your
24 file, at least I believe it is a photocopy
25 of your file.

1 C. LAMSTEIN-REISS, M.D.
2 necessarily fitness for duty issues. That
3 for his own sake would be good to discuss
4 with a therapist should he want too.

5 I also recommended he see a
6 psychiatrist for an evaluation 'cause two
7 different doctors had prescribed psychiatric
8 medication to him. One he finished taking
9 and one he hadn't started and it wasn't
10 clear to me why one of those was prescribed
11 and, I just, as a matter of course always
12 think it's better if someone sees a
13 psychiatrist for psychiatric medication
14 instead of their primary doctor.

15 Q. Did you tell Schoolcraft that he
16 didn't need medication?

17 MS. PUBLICKER METTHAM:

18 Objection.

19 A. I told him that after he told me
20 -- not at the first appointment. I told him
21 that at the second and third appointment
22 when he told me he no longer had no
23 symptoms.

24 Q. So you did tell him that he
25 didn't medication, right?

1 C. LAMSTEIN-REISS, M.D.
2 to know that should stressful -- when
3 stressful things happen with his life again
4 that these symptoms would not reoccur. We
5 need a significant period of time to know
6 that things really are calm and it's
7 possible. It's not something that I had
8 discussed with supervisors at that point,
9 but it's possible that we might have been
10 able to return him to full duty without
11 being able to speak to the doctor who
12 prescribed the Seroquel. Some doctor
13 thought he needed an antipsychotic and it
14 would not be prudent of us to give someone
15 back their gun in position of police
16 authority without knowing why that was.

17 Q. Well, did you ever find out why
18 some physician prescribed Seroquel?

19 A. The officer refused to allow me
20 to obtain that information.

21 Q. Who was it that prescribed
22 Seroquel?

23 A. Dr. Sure.

24 Q. How do you know that Dr. Sure
25 prescribed Seroquel?

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1 C. LAMSTEIN-REISS, M.D.

2 Q. Okay. So --

3 A. -- as well as my treatment
4 recommendations.

5 Q. He came back into your office
6 after your conversation with Knour and you
7 told him that his guns were being removed?

8 A. It was a temporary removal
9 pending a more complete discussion and
10 supervision the following day with my direct
11 supervisor, yes. At this point, it was
12 after hours. It was after normal business
13 hours. So I was the only one there.

14 Q. What time was this?

15 A. Don't know.

16 Q. Why were you seeing him after
17 hours?

18 MS. PUBLICKER METHAM:

19 Objection.

20 A. Because we always have coverage
21 24/7. The way it works is every day there
22 is someone who is -- who we call the 10 to 6
23 person, who works 10 to 6 and if the case
24 comes in too late in the afternoon to be
25 seen by someone working a regular tour, but

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1 C. LAMSTEIN-REISS, M.D.

2 report that gets sent out. We have our case
3 records and we have like a fill in the blank
4 form that just says that the gun should be
5 removed. Not any kind of evaluation, just
6 that the guns were removed and that we're
7 requesting a new ID card and so on.

8 Q. Okay. Going back to the
9 typewritten timeline that you've created.
10 The entry -- there's an entry 10/31/09. You
11 were the psychologist on pager duty. You
12 see that?

13 A. I do.

14 Q. And you got a call from Captain
15 Lauterborn?

16 A. Yes.

17 Q. Do you remember getting that
18 call from Captain Lauterborn?

19 A. More specifically, Captain
20 Lauterborn called the sick desk supervisor,
21 who then called the psychologist on pager
22 duty requesting I respond and in response to
23 that request I called Captain Lauterborn
24 back. So he didn't call me directly.

25 Q. Did Captain Lauterborn know that

1 C. LAMSTEIN-REISS, M.D.

2 you were the psychologist that had seen
3 Schoolcraft when he called?

4 MS. PUBLICKER METTHAM:

5 Objection.

6 A. I don't believe he did. What
7 happens is they call the sick desk
8 supervisor, who looks up and sees who is on
9 duty and they call whoever is on duty.

10 Q. So on October 31, 2009, you
11 happened to be on pager duty?

12 A. Correct.

13 Q. So Captain Lauterborn called the
14 sick desk and he was looking for somebody
15 from the psychological evaluation services?

16 MS. PUBLICKER METTHAM:

17 Objection.

18 A. Psychological evaluation
19 section. Although, the psychological
20 services section, which does pre-employment
21 screening, they also do pager duty. He was
22 looking for a department psychologist to
23 give him a call to consult about the
24 situation.

25 Q. Did you tell Captain Lauterborn

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1 C. LAMSTEIN-REISS, M.D.

2 you had evaluated and met with Schoolcraft?

3 A. Yes.

4 Q. And told him that during the
5 conversation that you had with him on
6 October 31st?

7 A. Yes.

8 Q. What else did you tell Captain
9 Lauterborn?

10 A. He was asking me if there was
11 any reason to be concerned about the fact
12 that he went AWOL and that he seemed to be
13 upset and said he had stomach pains and
14 should they be concerned, do they need to go
15 look for him, make sure he's okay.
16 Typically, in that situation they do. He
17 said he wasn't sure they wanted to suspend
18 him, because they thought this was more of a
19 psychological problem as opposed to a
20 disciplinary one and so he wanted to consult
21 with me.

22 I told him that as of the last
23 time I saw him, which was a few days
24 earlier, I had no reason to think he was a
25 danger to himself or others. Never

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1 C. LAMSTEIN-REISS, M.D.

2 expressed thoughts of suicide. It didn't
3 seem to be anything that serious that would
4 lead me to be concerned. However, he had
5 also never acted like that before. He never
6 went AWOL, leaving even though he was told
7 to stay and was now saying he had stomach
8 pains, while being visibly upset. So I did
9 not know if that meant something new
10 happened that led him to be so upset that he
11 was acting in a different manner going AWOL
12 and that kind of stuff and led to a
13 reoccurrence of stomach pains badly enough
14 that he did that or maybe the stomach pains
15 never went away to begin with and I wasn't
16 sure and that my evaluation is -- even
17 though, I was not saying this person is
18 suicidal, he's had these thoughts, you must
19 -- it was nothing like that. I had no
20 reason to think he was, except my evaluation
21 was only as good as the last time I saw
22 them.

23 So if something happened since
24 then or they're acting different since then,
25 that may be different. And so I thought he

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1 C. LAMSTEIN-REISS, M.D.

2 absolutely did need to find him and make
3 sure that he was okay.

4 Q. Was your sharing of information
5 about Schoolcraft with Lauterborn a
6 violation of Schoolcraft's privacy?

7 MS. PUBLICKER METTHAM:

8 Objection.

9 A. No. This is -- they're not
10 treatment records. Whenever they come to
11 our office before they -- before I allow
12 them to open their mouth on all, I make sure
13 that they know that the interview is on the
14 record only within the department and only
15 on a need to know basis, so within that it
16 is on the record.

17 So in this case, someone is AWOL
18 and they're upset and they leave and they
19 say their stomach hurts and they're acting
20 in that manner, I deemed there was a need to
21 know, for him to know some basic information
22 about why he was on restricted duty. Not
23 information like, you know, whether or not
24 his father used -- had any kind of drug
25 problem, whether or not he's had sex in the

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1 C. LAMSTEIN-REISS, M.D.

2 believe you're 2899 and 282, Mr. Smith?

3 MR. SMITH: I'm actually
4 referring to 2901, with the ledger and
5 pager.

6 MS. PUBLICKER METTHAM: It is
7 D282, it is but 2901.

8 Q. So is there a rather long entry
9 for 10/31 in your file, Doctor?

10 A. I don't know what you consider
11 rather long, but it's --

12 Q. Four pages?

13 A. One, two, three, four and a
14 third, yes.

15 Q. All right, can you just read
16 that into the record.

17 A. Sure. Pager duties regarding
18 P.O. Adrian Schoolcraft, 10/31/09, on left
19 of the page I noted that I was on at 17:40
20 hours. Page number 455 refers to the sick
21 desk log of my being put on duty. I noted
22 below that that I was off duty at 21:40
23 hours. Back to the main text in the body.
24 10/31/09. Telephone contact with sick desk
25 Sergeant Kloos.

1 C. LAMSTEIN-REISS, M.D.

2 MS. PUBLICKER METTHAM:

3 K-l-o-o-s.

4 A. Yes. I believe that's the
5 spelling. It's possible I'm wrong about the
6 spelling. MOS was at work today. He
7 slammed sick report on the sergeant's desk
8 and said he was going out sick. Sergeant
9 told him to stick around. He refused and
10 left. Didn't follow procedure. Typically,
11 they called sick desk and get authorization
12 and wait for command to arrange coverage.
13 MOS was working on the telephone
14 switchboard. MOS did not go straight home.
15 Cops are at his home waiting for his
16 arrival. They called MOS on his cell phone.
17 They think he picked up and then hung up.
18 Since then no answer. They are thinking of
19 suspending him, but they suspect it is more
20 of psych problem. XO of MOS's command, the
21 81 Precinct, is Captain Lauterborn and
22 requests response from PES and I signed my
23 name.

24 Q. The is information that you
25 received from Sergeant Kloos from the sick

1 C. LAMSTEIN-REISS, M.D.

2 desk?

3 A. Correct.

4 Q. All right, please continue.

5 A. It will be more clear as I'm
6 reading through the notes, but it's possible
7 that the part about possibly not suspending
8 him because they thought it might be more of
9 a psych problem, that may have come
10 secondhand through Sergeant Kloos. If it
11 came directly, it would be the rest the
12 notes.

13 Telephone contact with Captain
14 Lauterborn. MOS doing a 7 to 3 day tour
15 today at TS all day, meaning telephone
16 switchboard all day. All was fine. He
17 typically keeps to self and doesn't converse
18 much with other officer and did same today.
19 Nothing seemed out of ordinary. 2:00 p.m.,
20 he went down to locker room, changed and
21 then put a sick report on sergeant's desk
22 and said going sick. He wrote that he had
23 stomach pain. Sergeant tried to stop him,
24 but he left anyway. Underlying issues. MOS
25 has made allegations against others.

1 C. LAMSTEIN-REISS, M.D.
2 Department's investigation of these
3 allegations picked up this week and it
4 snowballed from there. This week about four
5 P.O.'s and two civilian people were called
6 down for questioning. MOS goes up to them
7 and asked about it. Notifications are in
8 telephone message log, so he knows who is
9 going. When they return, he tries to
10 intercept them and get information from them
11 about what he was asked -- about -- it
12 should have been what they were asked. Or
13 that thought the person was a he. Anyway,
14 that's what it says what he was asked.
15 Today was first tour back after RDOs. Not
16 sure what happened today that triggered him
17 to leave like that.

18 Delegates, peers, sergeants and
19 Captain Lauterborn all left him messages and
20 asked him to go back to command. A
21 lieutenant is at him home. His car is
22 there. Landlord said MOS may have been
23 there earlier. Can usually hear MOS's
24 footsteps when home. MOS not home.

25 Next entry, I left a message on

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1 C. LAMSTEIN-REISS, M.D.

2 MOS's cell phone. I gave my cell number and
3 Captain Lauterborn's cell phone. I told him
4 that the Captain said he could just return
5 to his home if didn't want to go to the
6 command. I urged him to go home or call his
7 captain, so this could be resolved quickly
8 and easily without need for a city-wide
9 mobilization to search for him or
10 disciplinary action, like suspension. Much
11 easier to just resolve it quickly and easily
12 now. I explained that everyone is just
13 concerned for his safety and they want to
14 make sure everyone is okay.

15 Next entry, telephone contact
16 with Captain Lauterborn. I informed captain
17 that I left message on MOS's cell phone as
18 described above. I suggested that captain
19 call MOS's father because that's the person
20 he is closest to and the person who is most
21 likely to know his whereabouts. Captain
22 will call undersigned when locates or hears
23 from MOS, signed my name.

24 Next entry at 20:15 hours.

25 Telephone contact with Captain Lauterborn.

1 C. LAMSTEIN-REISS, M.D.

2 Still no word from MOS. Captain called MOS's
3 father, who also hadn't heard from him.
4 Father, quote, had some issues, end quote,
5 over the phone -- over phone, but eventually
6 understood captain's point of view and
7 confirmed. Hoping father will call MOS and
8 encourage him to go home. Captain will go
9 to MOS's home. It's possible he's home, but
10 not answering phone. I asked if the
11 landlord has a spare key. He said yes and
12 captain has it, but legal issues with using.
13 Have to have cause. Hoping to avoid going
14 that route.

15 Q. What were those legal issues?

16 A. I didn't ask. I don't know.

17 MS. PUBLICKER METHAM:

18 Objection.

19 Q. All right, go ahead?

20 A. And I signed my name. 20:40
21 hours the next entry -- I'm sorry 21:40
22 hours is the next entry. Telephone contact
23 with Sergeant Kloos. Sick desk off duty
24 since not known when MOS might be located
25 and I signed my name.

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1 C. LAMSTEIN-REISS, M.D.

2 Then next page on the top
3 regarding Adrian Schoolcraft addendum to
4 10/31/09 note of telephone contact with
5 Captain Lauterborn at approximately 17:50
6 hours. Delayed entry made on 10/14/10. In
7 reviewing folder, the below information was
8 found to not be documented in prior note,
9 but is clear in undersigned's memory.
10 Captain Lauterborn asked if MOS was suicidal
11 or depressed because he needed to know how
12 concerned they should be about MOS's safety
13 given his going AWOL. Not answering phone
14 calls, not answering door of home, but his
15 car was there, et cetera.

16 Q. Can I stop you right there.
17 When did you make this entry?

18 A. October 14, 2010.

19 Q. October what?

20 A. 14, 2010.

21 Q. Can I see the original that
22 you're reading from?

23 A. Sure.

24 Q. How do you know that you made
25 this entry on October 24, 2010?